

Thinking Maps Implementation Log

Name & Grade Level: _____

This log includes info from: _____ to _____
(date) (date)

1) Thinking Maps used by students and/or staff:

Date	Subject	Specific Content (Concept, focus, or area)	List a "T" to indicate the Type of Thinking Map(s) that Teacher Used/Modeled List an "S" to indicate the Type of Thinking Map(s) that Student(s) Used							
			Circle	Bubble	Double Bubble	Tree	Brace	Flow	Multi- Flow	Bridge

2) My reaction to *Thinking Maps* is:

3) My future plans for *Thinking Maps* include:

4) Question(s) and/or concerns:

5) Please X and attach the sample items listed below that have been decided/agreed upon at the building level:

- ☐ One teacher-developed/modeled or class-developed *Thinking Map* (mark your name, subject, & grade level(s) at top)
- ☐ Or one student-developed *Thinking Map* (mark your name, subject, & grade level(s) at top)
- ☐ One completed lesson plan (complete highlighted section printed on the other side of this log)